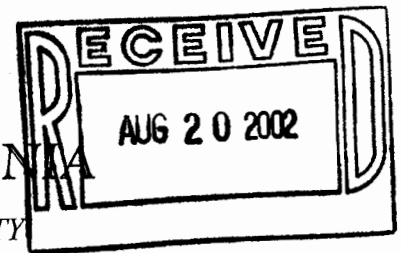




COMMONWEALTH of VIRGINIA

DEPARTMENT OF ENVIRONMENTAL QUALITY



W. Tayloe Murphy, Jr.
Secretary of Natural Resources

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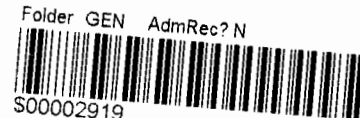
Robert G. Burnley
Director

Thomas L. Henderson
Regional Director

August 15, 2002

WARNING LETTER

Ms. Remonia Davis
Environmental Engineer
BGF Industries, Inc.
401 Amherst Avenue
Altavista, VA 24517



RE: Resource Conservation and Recovery Act (RCRA)
Compliance Evaluation Inspection (CEI) on July 15/16, 2002
BGF Industries, Inc. - EPA ID#VAD119071314

Dear Ms. Davis:

Thank you for your cooperation during the Compliance Evaluation Inspection (CEI) conducted at the above referenced facility on July 15/16, 2002, by the Department of Environmental Quality (DEQ), South Central Regional Office. Based on information provided during the inspection, the facility was evaluated for compliance with the Virginia Hazardous Waste Management Regulations (VHWMR) as a Large Quantity Generator (LQG). The appropriate checklists completed for the inspection are enclosed. Based on the inspection, the Department has reason to believe that the facility may be in violation of the VHWMR. I have summarized the available information and identified the applicable laws and regulations.

1. ***As required by 40 CFR 264/265.174, the operator must, at least weekly, inspect areas where containers are stored, looking for leaking containers and for deterioration of containers.*** During the inspection it was observed that several inspection logs between March and May, 2002 were not completed.

Please review the above and submit a written explanation within twenty (20) calendar days of the date of this letter regarding the corrective actions your facility intends to take or has taken to correct the situation. Failure to respond may result in enforcement action by DEQ. This Warning Letter is not an agency proceeding or determination which may be considered a case decision under the Virginia Administrative Process Act, Va. Code § 2.2-4000 *et seq.*

The DEQ appreciates the facility's efforts in proper waste management. If you should have further questions or need assistance in the future, please do not hesitate to contact me at (434) 582-5120.

Sincerely,

Jan B. Walwyn
Environmental Specialist II

Enclosures

c: Mr. Michael Sexton, DEQ-SCRO
Sanjay Thirunagari, DEQ-OTA
DEQ - SCRO Files *An Agency of the Natural Resources Secretariat*

**DEPARTMENT OF ENVIRONMENTAL QUALITY
WASTE DIVISION**

SURVEY SHEET
FOR INSPECTION OF HAZARDOUS WASTE FACILITIES

Name of Facility: *BGF Industries, Inc.*

Address: *401 Amherst Avenue
Altavista, VA 24517*

EPA ID Number: *VAD119071314*

Facility Representative: *Remonia Davis, Environmental Engineer*

Telephone Number: *(434) 369-4751*

Inspector(s): *Jan B. Walwyn, Environmental Specialist II*

Date of Inspection: *July 15/16, 2002*

1. What is the business activity of the firm? (i.e., furniture manufacturing, metal plating, recycling)

Textile manufacturing.

2. Give a brief description of the waste stream(s) (by chemical name if possible) and hazardous waste code(s) generated by the firm.

Waste combustible, liquid (Naptha) - D001, D018, D039, D040

Waste corrosive, liquid - D002

Waste toxic liquids, organic (Phenol)- U188

Waste flammable, liquids (various chemicals & solvents) - (D001, D002, D035, F002, F003, F005, U133)

Hazardous waste, liquid (water, volan) - D007

3. List (a) the nominal amounts of hazardous waste generated in any month; and (b) the greatest amounts of all wastes ever accumulated/generated at the site, if applicable to generator category determination (e.g. if a CESQG, have they ever exceeded 1000 kg accumulation, or if a SQG have they ever exceeded 1000 kg/mo generation for all waste streams aggregate).

Waste Type

Shipped

Based on the Biennial Report submitted in 2001, the facility is definitely a LQG.

4. For the evaluation period covered by this inspection:

- | | |
|---|------------|
| a) Has the facility generated >1 kg/mo of ACUTE hazardous waste (P-list) | Y <u>N</u> |
| b) Has the facility generated >100 kg of ACUTE hazardous waste from spill clean-up residue? | Y <u>N</u> |
| c) Has the facility accumulated hazardous waste in excess of time and quantity limits established for their generator class? | Y <u>N</u> |
| [Note: a CESQG may not accumulate more than 1000 kg, a SQG may not accumulate more than 6000 kg or accumulate more than 180 days (or 270 days), and a Generator may not accumulate for more than 90 days] | |
| d) Has the facility <u>episodically</u> generated hazardous waste in excess of their normal generator category? | Y <u>N</u> |
| [Note: Applicable generator category requirements apply during the period of generation and for as long as the waste remains on site]. | |
| Provide <u>comment</u> for Question 10 evaluation category assignment. | |

5. How is the waste presently being handled?
List all transporters and facilities and on-site treatment performed

Transporter(s):

St. Joseph Motor Lines	[PAD987358587]
Envirochem	[NCD982170292]
Fisher Industrial	[ALD981020894]
Maumee Express, Inc.	[NJD986607380]
Environmental Options	[VAD000122994]
Freehold Cartage, Inc.	[NJD054126164]

TSD(s):

Safety-Kleen Systems, Inc.	[SCR000075150]
Safety-Kleen Systems, Inc.	[VAD000737361]
Safety-Kleen (TS), Inc.	[NCD000648451]
Southeastern Chemical & Solvent	[SCD036275626]
Republic Env. Systems	[PAD085690592]

Fluorescent Bulbs to:

AERC.com, Inc.
NE Lamp Recyclers.

6. Does the facility generate any hazardous waste that is excluded from regulation? (e.g., reclaimed on-site, used as a substitute for a CCP, de-characterized by treatment, etc.). If Yes, list the waste and the basis for exclusion. YES NO

7. Used Oil Management:

- a) Does the facility generate used oil? X On specification only
____ Off-spec/on-spec
____ None
- b) Does the facility transport used oil ?(notification required) Y N
- c) Does the facility Market or Burn off-specification used oil? Y N
[If Yes, complete Used Oil Checklist]
- d) Does the facility burn used oil in an on-site space heater? Y N
[Verify compliance requirements and comment]
- e) Does the facility mix hazardous waste with used oil? Y N
If Yes, is this on-site CESQG HW? Y N
Is this ignitable only HW? Y N
[For any mixing, provide comment and evaluate for Part 279 compliance]
- f) Does the facility ensure delivery of used oil to a legitimate used oil reclaimer? Y N
Please specify and list:
An off-site servicing company owns the forklifts and services them. The used oil and filters go to Safety-Kleen.
- g) Used Oil Filters:
Does the generator manage used oil filters? Y N
Does the generator manage these under the filter exclusion language of Part 261.4(b)(13)? Y N
Are the filters managed in such a manner to meet the conditions of the exclusion? Y N
Specify management method(s):
See 7(f)

8. Does the facility generate any hazardous waste that is reclaimed to recover economically feasible amounts of gold, silver, platinum, palladium, iridium, osmium, rhodium, ruthenium, or any combination of these? YES NO
If YES, list the waste and where it is sent. Verify compliance with Part 266 Subpart F and provide

comment.

9. Does the facility generate, transport, store, collect, or reclaim spent lead-acid batteries? If the facility stores batteries before reclaiming them, complete the **Metals Recovery Checklist**. YES NO

NOTE: Homestead services the forklifts, and manages the lead-acid batteries. Larger batteries go to Weldex (NYD030485288), while smaller batteries go to Interstate Batteries (AID046481032).

10. Based on the above preliminary information the facility is considered to be acting as, and is being evaluated for this inspection as, a [underline or circle all applicable]:
- a. Conditionally exempt small quantity generator
 - b. Small quantity generator
 - c. **Generator**
 - d. Permitted or Interim Status TSD
 - e. Unpermitted TSD (explain in comments section)
 - f. Transporter
 - g. Other: please explain below. (If episodic generation has occurred, you will need to assign an appropriate generator category for this evaluation and also assess compliance during the episodic period)
-

11. List each container and tank accumulation area. Specify the number and capacity of each tank and container type. [Note: Include any satellite accumulation areas and verify compliance with satellite accumulation requirements; if non-compliance, provide comment]

<u>Location</u>	<u>Number of Containers</u>
Accumulation Area	19 (55-gal. drums)
<u>Partwashers (serviced by Safety-Kleen)</u>	
Dormier WR	2 (1 @ 5 gal., 1 @ 30 gal.)
Ruti WR	4 (2 @ 17 gal.; 1 @ 30 gal.; 1 @ 5 gal.)
Towmotor Shop	1 (30 gal.)
Spec Prod.	1 (30 gal.)
Shop	2 (30 gal.)
Twisting	1 (30 gal.)
Unifil	1 (30 gal.)

12. Comments:
The facility uses only dot approved drums, therefore meeting the subpart CC requirements.
-

13. Waste Flow Diagram:
No diagram needed at this time.
-

4. CONTAINERS CHECKLIST

NA = Not Applicable, NC = Non-Compliance

40 CFR CITATION	REGULATION	YES	NO	NA	NC
	SECTION A - USE AND MANAGEMENT				
264/265.171	1. Are containers in good condition?	X			
	SECTION B - COMPATIBILITY OF WASTE WITH CONTAINER				
264/265.172	2. Is container made of a material that will not react with the waste which it stores?	X			
	SECTION C - MANAGEMENT OF CONTAINERS				
264/265.173(a)	3. Is container always closed while holding hazardous waste?	X			
264/265.173(b)	4. Is container not opened, handled, or stored in a manner, which may rupture it or cause it to leak?	X			
	SECTION D - INSPECTIONS				
264/265.174	5. Does owner/operator inspect containers at least weekly for leaks and deterioration?		X		X
	SECTION E - IGNITABLE AND REACTIVE WASTES				
264/265.176	6. Are containers holding ignitable and reactive waste located at least 15 m (50 ft) from facility property lines?	X			
	PERMITTED FACILITIES ONLY				
	SECTION F - INCOMPATIBLE WASTE				
264/265.177(a)	7. Are incompatible wastes or materials placed in the same containers?			X	
264/265.177(b)	8. Are hazardous wastes placed in washed, clean containers when they previously held incompatible waste?			X	
264/265.177(c)	9. Are incompatible hazardous wastes separated from each other by a berm, dike, wall, or other device?			X	
	SECTION G - CLOSURE				
	10. Do container storage areas have a containment system?		X		
264/265.178	11. At closure, were all hazardous wastes and associated residues removed from the containment system?			X	

COMMENTS:

5. Several inspection logs between March 12 and May 30, 2002 were not completed.

5. GENERATORS CHECKLIST

NA = Not Applicable, NC = Non-Compliance

40 CFR CITATION	REGULATION	YES	NO	NA	NC
SECTION A – MANIFEST					
262.20	1. Does generator ship waste off-site?	X			
262.20	2. Does generator use manifest?	X			
	a. If no, is generator a small quantity generator (generating between 100 and 1000 kg/month?) NOTE: SQGs are only exempt if wastes are reclaimed. (See §262.20(e).)			X	
	1. If yes, does generator indicate this when sending waste to a TSD facility?			X	
Part 262 Appendix	b. If yes, does manifest include the following information?				
	1. Manifest document no.	X			
	2. Generator's name, mailing address, telephone no.	X			
	3. Generator EPA I.D. no.	X			
	4. Transporter Name(s) and EPA I.D. no.(s)	X			
	5. Facility name, address, and EPA I.D. no.	X			
	6. Alternate facility name, address, and EPA I.D. no.		X		
	7. Instructions to return to generator if undeliverable	X			
	8. Waste information required by DOT – shipping name, quantity (weight or vol.), containers (type and number)	X			
	9. Emergency information (optional) (special handling instructions, telephone no.)	X			
	10. Is the following certification on each manifest form? "This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable national and international regulations."	X			
262.40	11. Does generator retain copies of manifests? If yes, complete a through g. (§262.23)	X			
	a. Did generator sign and date all manifests?	X			

40 CFR CITATION	REGULATION	YES	NO	NA	NC
	b. Did generator obtain handwritten signature and date of acceptance from initial transporter?	X			
262.40	c. Does generator retain one copy of manifest signed by generator and initial transporter?	X			
262.40	d. Do returned copies of manifest include facility owner/operator signature and date of acceptance?	X			
262.42	12. Have manifests been received from the TSD facility for any waste which was shipped over 45 days ago?		X		
	a. If no, has the generator filed an exception report?		X		
	b. Does the exception report include:				
	1. a legible copy of the manifest for which the generator does not have confirmation of the delivery? and			X	
	2. a cover letter explaining the efforts taken to locate the shipment?			X	
262.11	SECTION B – HAZARDOUS WASTE DETERMINATION				
	3. Does generator generate solid waste(s) listed in Subpart D (List of Hazardous Waste)?	X			
	4. Does generator generate solid waste(s) listed in Subpart C that exhibit hazardous characteristics (corrosivity, ignitability, reactivity, TC)?	X			
	a. Does generator determine characteristics by testing or by applying knowledge of processes?	Knowledge of processes.			
	1. If determined by testing, did generator use test methods in Part 261, Subpart C (or equivalent)?			X	
262.11	5. Has the generator evaluated all solid wastes to determine whether the solid wastes are hazardous wastes?	X			
	SECTION C – PRETRANSPORT REQUIREMENTS				
262.30	6. Does generator package waste in accordance with 49 CFR 173, 178, and 179 (DOT requirements)?	X			
	a. Are containers to be shipped leaking or corroding?		X		
	b. Complete Checklist 4. Containers to evaluate condition of containers.	Attached.			

40 CFR CITATION	REGULATION	YES	NO	NA	NC
	c. Is there evidence of heat generation from incompatible wastes in the containers?		X		
262.31	7. Does generator follow DOT labeling requirements in accordance with 49 CFR 172?	X			
262.32	8. Does generator mark each package in accordance with 49 CFR 172?	X			
262.32	9. Is each container of 110 gallons or less marked with the following label? HAZARDOUS WASTE - Federal Law Prohibits Improper Disposal. If found, contact the nearest police or public safety authority or the U.S. Environmental Protection Agency.	X			
	a. Generator name(s) and address(es)	X			
	b. Manifest document No.	X			
262.33	10. Does generator have placards to offer to transporters?		X		
262.34	11. Accumulation time				
	a. Are containers used to temporarily store waste before transport?	X			
262.34(a)(2)	1. If yes, is each container clearly dated.	X			
262.34(a)(3)	2. If yes, is each container labeled or clearly marked with the words "Hazardous Waste?"	X			
262.34(c)(1)	12. Does the generator have satellite accumulation areas where up to 55 gallons of any one type of hazardous waste (HW) (1qt acutely HW) are accumulated? If yes,		X*		
262.34(c)(1)(ii)	a. Are the containers marked with the words "Hazardous Waste" or other words that identify the contents of the container?		X		
262.34(c)(1)	13. Are amounts in excess of those allowed being accumulated in the satellite accumulation area? If yes,		X		
	a. Has the generator marked the excess amount with the date the excess amount began accumulating? and			X	
	b. Has the generator either removed the excess amount within three days of the date of excess accumulation or has the generator complied with all other provisions for accumulation areas. Namely, has the generator notified the Executive Director about the location of the accumulation area?			X	
262.40	SECTION D - RECORDKEEPING AND RECORDS				
	14. Does generator keep the following reports for 3 years?				
	a. Manifest or signed copies from designated facilities	X			
	b. Biennial reports	X			

40 CFR CITATION	REGULATION	YES	NO	NA	NC
	c. Exception reports	X			
	d. Test results	X			
	16. Where are the records kept (at facility or elsewhere)?	At the facility.			
	SECTION E – SPECIAL CONDITIONS				
	17. Has the primary exporter received from or transported to a foreign source any hazardous waste?		X		
262.53	a. If yes, has he filed a notice with the Regional Administrator?			X	
262.54	b. Is this waste manifested and signed by a foreign consignee?			X	
262.54	c. If generator transported wastes out of the country, has he received confirmation of delivered shipment?			X	
268	SECTION F – LDR REQUIREMENTS				
	18. Does the facility generate, transport, treat, store or dispose any land-restricted wastes?	X			
	19. Is land disposal of wastes occurring? If yes,		X		
	a. Has the facility been granted an extension to the effective date for land restriction applicable to its restricted waste? OR			X	
	b. Has the facility been granted an exemption from prohibition pursuant to a petition for those land-restricted wastes and units covered by the petition? OR			X	
	c. Are the wastes hazardous only because they exhibit a hazardous characteristic and are they disposed outside the Commonwealth into an injection well without exhibiting any prohibited characteristic of hazardous waste at the point of injection?			X	
268.5	22. Has the owner/operator submitted an application for case-by-case extension to the effective date of any applicable restriction?		X		
268.6	23. Has the owner/operator been granted a petition seeking an exemption from a prohibition for the disposal of hazardous waste in a particular unit or units?		X		
268.3	24. Are facility representatives diluting the restricted waste or residual from treatment of the restricted waste as a substitute for adequate treatment, to circumvent the effective date of prohibition, to otherwise avoid a prohibition, or to circumvent a land disposal prohibition?		X		

40 CFR CITATION	REGULATION	YES	NO	NA	NC
268.4	25. Is the facility treating land-restricted wastes in a surface impoundment or series of surface impoundments? (Note: Evaporation of hazardous constituents in a surface impoundment as the principal means of treatment is not considered to be an acceptable form of treatment for land restricted wastes.)		X		
	26. If yes, complete Check Sheet 12. Surface Impoundments.				
	27. Is the facility treating waste in Tanks or Containers in order to meet applicable treatment standards under 268.40?		X		
268.7(a)(4)	28. If Yes, has the facility developed a Waste Analysis Plan?			X	
268.7(a)(4)(ii)	29. Has the Waste Analysis Plan been filed with the Director a minimum of 30 days prior to the treatment activity?			X	
268.7(a)(1)	30. Restricted wastes, which the generator is managing for which he has not met the applicable treatment standards, has the generator accompanied each shipment of waste with a notification to the treatment facility of the appropriate treatment standards and any applicable prohibitions?	X			
	31. Did the notification include the following information:				
268.7(a)(1)(i)	a. EPA Hazardous Waste Number?	X			
268.7(a)(1)(ii)	b. The waste constituents that the treater will monitor, if monitoring will not include all regulated constituents?	X			
268.7(a)(1)(iii)	c. The manifest number associated with the shipment of waste? and	X			
268.7(a)(1)(v)	d. Waste analysis data, where available?	X			
268.7(a)(2)	32. For restricted wastes which the generator has determined can be land disposed without further treatment, has the generator accompanied each shipment of waste with a notification and certification to the land disposal facility that the waste meets the applicable treatment standards and the applicable prohibitions set forth in 268.32 or RCRA section 3004(d)?			X	
	33. Did the notification include the following information:				
268.7(a)(2)(i)(A)	a. EPA Hazardous Waste Number?			X	
268.7(a)(2)(i)(B)	b. The waste constituents that the treater will monitor, if monitoring will not include all regulated constituents?			X	
268.7(a)(2)(i)(C)	c. The manifest number associated with the shipment of waste? And			X	
268.7(a)(2)(i)(D)	d. Waste analysis date, where available?			X	

40 CFR CITATION	REGULATION	YES	NO	NA	NC
268.7(a)(2)(ii)	34. Was the certification signed by an authorized representative, and did it state the following: "I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA Section 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."			X	
268.7(a)(3)	35. Has the generator received a case-by-case exemption on restricted waste, been granted an exemption through petition, or those wastes subject to a national variance, has the generator forwarded notice with the waste to the land disposal facility stating that the waste is exempt from the land disposal restrictions?		X		
268.7(a)(7)	36. Does the generator retain on-site copies of all notices, certifications, demonstrations, waste analysis data, and other documentation for at least five years from the date the waste was last sent to on-site or off-site treatment, storage or disposal?			X	
	37. Is the generator storing land restricted waste? (For one year storage only)		X		
	38. If yes, is the storage on-site solely for the purpose of the accumulation of such quantities of hazardous waste as necessary to facilitate proper recovery, treatment or disposal?			X	

COMMENTS:

12. Although no satellite accumulation was occurring during the inspection, the operators were able to accurately describe the management procedures that they normally use when the SA is in place. The procedures described by the operator mirrored the requirements set forth by the regulations.

7. HEALTH & SAFETY CHECKLIST

NA = Not Applicable, NC = Non-Compliance

40 CFR CITATION	REGULATION	YES	NO	NA	NC
	SECTION A - OUTLINE OF PERSONNEL TRAINING PROGRAM				
264/265.16(d)(3)	1. Does the facility have a written training program?	X			
264/265.16(a)(1)	2. Does the program consist of:				
	a. strictly classroom instruction?		X		
	b. strictly on-the-job training?		X		
	c. classroom instruction AND on-the-job training?	X			
264/265.16(c)	3. Is an annual refresher course required for personnel whose positions at the facility are related to hazardous waste management?	X			
	SECTION B - JOB TITLE/JOB DESCRIPTION				
264/265.16(d)(1)	4. Is a job title provided for each employee whose position at the facility is related to hazardous waste management?	X			
264/265.16(d)(2)	5. Is a job description provided for each employee whose position at the facility is related to hazardous waste management?	X*			
	SECTION C - TRAINING DIRECTOR				
264/265.16(a)(2)	6. Is the training program directed by a person trained in hazardous waste management?	X			
	SECTION D - RELEVANCE OF TRAINING TO JOB POSITION				
264/265.16(a)(2)	7. Are facility personnel instructed in hazardous waste management procedures (including contingency plan implementation) relevant to their positions?	X			
	SECTION E - TRAINING AND EMERGENCY RESPONSE				
264/265.16(a)(3)	8. Does the training program include the following emergency response procedures where applicable ?				
	a. Procedures for using, inspecting, repairing, and replacing facility emergency and monitoring equipment?	X			
	b. Key parameters for automatic waste feed cut-off systems?	X			
	c. Procedures for utilizing communications or alarm systems?	X			
	d. Directions for responding to fires or explosions?	X			
	e. Procedures for groundwater contamination response?		X		
	f. Procedures for conducting shutdown operations?	X			
	SECTION F - IMPLEMENTATION OF TRAINING PROGRAM				

40 CFR CITATION	REGULATION	YES	NO	NA	NC
264/265.16(b)	9. Are all facility personnel trained within six months of their employment or assignment to the facility or transfer to a new position?	X			
264/265.16(b)	10. Are facility personnel allowed to work unsupervised before their training program has been completed?		X		
264/265.16(d)4 and (e)	11. Are records maintained which document that the required training has been given to and completed by facility personnel?	X			
	SECTION G - TESTING AND MAINTENANCE OF EQUIPMENT				
264/265.33	12. Does the owner/operator test and maintain (as necessary to assure its proper operation in time of emergency) the following equipment:				
	a. All communications or alarm systems?	X			
	b. Fire protection equipment?	X			
	c. Spill control equipment?	X			
	d. Decontamination equipment?	X			
	SECTION H - GENERAL INSPECTION REQUIREMENTS (PERMITTED FACILITIES ONLY)				
264/265.15(b)(1)	13. Does the owner/operator maintain a written schedule at the facility for the inspection of:				
	a. Monitoring equipment?			X	
	b. Safety and emergency equipment?			X	
	c. Security devices?			X	
	d. Operating and structural equipment?			X	
	e. Types of problems with equipment:				
	1. Malfunction			X	
	2. Operator error			X	
	3. Discharges			X	
264/265.15(b)(3)	14. Does the schedule identify the types of problems to look for?			X	
264/265.15(b)(4)	15. Is the frequency of inspection based on the possible deterioration of equipment and the probability of incident?			X	
264/265.15(b)(4)	16. Are areas subject to spills, such as loading and unloading areas, inspected daily?			X	
264/265.15(d)	17. Does the owner/operator maintain an inspection log? If yes, does the log include:			X	
	a. Date and time of inspection?			X	
	b. Name of inspector?			X	
	c. Notations of observations?			X	
	d. Date and nature of repairs or remedial actions?			X	
	18. Have any malfunctions or other problems not been remedied? (Summarize in comments section.)		X		
	SECTION I - REQUIRED AISLE SPACE				
264/265.35	19. Does the facility maintain aisle space to allow unobstructed movement of personnel, fire protection equipment, spill control equipment, and decontamination equipment?	X			

40 CFR CITATION	REGULATION	YES	NO	NA	NC
264/265.35	20. If aisle space is not maintained, has the owner/operator demonstrated to the Regional Administrator that the space is not needed?			X	
264/265.32	SECTION J - EQUIPMENT REQUIREMENTS				
	21. Is there evidence of fire, explosion, or contamination of the environment? If yes, explain in the comment section.		X		
	22. Is the facility equipped with the following:				
264/265.32(a)	a. An internal communications or alarm system capable of providing immediate emergency instruction (voice or signal) to facility personnel?	X			
264/265.32(b)	b. A device such as a telephone (immediately available) or handheld two-way radio capable of summoning emergency assistance from police, fire, or state or local emergency response teams?	X			
264/265.32(c)	c. Portable fire extinguishers?	X			
264/265.32(c)	d. Fire control equipment (including special extinguishing equipment such as foam, inert gas, or dry chemical)?	X			
264/265.32(c)	e. Spill control equipment?	X			
264/265.32(c)	f. Decontamination equipment?	X			
264/265.32(d)	g. Water at adequate volume and pressure to supply water hose streams, or foam producing equipment, or automatic sprinklers, or water spray systems?	X			
	SECTION K - REQUIREMENTS FOR IGNITABLE, REACTIVE, OR INCOMPATIBLE WASTES (PERMITTED FACILITIES ONLY)				
264/265.17(a)	23. Does the facility handle ignitable or reactive waste? If yes:			X	
	a. Does the owner/operator take the following precautions to prevent accidental ignition or reaction of wastes: Separate and protect ignitable or reactive wastes from sources of ignition or reaction (open flames, smoking, cutting, welding, hot surfaces, frictional heat, static electrical or mechanical sparks, spontaneous ignition, and radiant heat)?			X	
264/265.17(a)	24. Does the owner/operator confine smoking and open flames to specially designated locations, while ignitable or reactive waste is being handled?			X	
264/265.17(a)	25. Are "No Smoking" signs placed conspicuously wherever there is a hazard from ignitable or reactive waste?			X	
264/265.17(a)	26. Does the owner/operator have procedures in place to prevent accidental ignition or reaction of wastes?			X	
264/265.50 through §265.56	SECTION L - CONTINGENCY PLAN				

40 CFR CITATION	REGULATION	YES	NO	NA	NC
264/265.51(a)	27. Does the owner/operator have a Contingency Plan, or a Spill Prevention Control and Counter measures (SPCC) Plan, or some other emergency plan, that is amended for hazardous waste management?	X			
264/265.53(a)	28. Is a copy maintained at the facility?	X			
264/265.53(b)	29. Has a copy been submitted to all local police and fire departments, hospitals, and State and local emergency response teams?	X			
264/265.52(a)	30. Does the plan describe the control procedures taken in the event of a fire, explosion, or release?	X			
	31. Does the plan describe how and when it will be implemented?	X			
264/265.52(c)	32. Does the plan describe arrangements agreed to by local police and fire departments, hospitals, contractors, and State and local emergency response teams to coordinate emergency services?	X			
264/265.52(d)	33. Does the plan list names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinators?	X			
264/265.52(d)	34. Is one person named as the primary coordinator?	X			
264/265.55	35. Does the coordinator have the authority to commit the resources to carry out the emergency plan?	X			
264/265.52(e)	36. Does the plan physically describe and identify the location of all emergency equipment at the facility?	X			
	37. Does the plan include provisions to ensure that the equipment is cleaned and fit for its intended use before operations are resumed?	X			
264/265.52(f)	38. Does the plan include an evacuation plan for facility personnel?	X			
264/265.52(f)	39. Does the plan describe:				
	a. Signal(s) to be used to begin evacuation?	X			
	b. Evacuation routes?	X			
264/265.56(a)	c. Does the plan describe the methodology for immediate notification of:				
	1. Facility personnel?	X			
	2. State or local agencies with designated response roles?	X			
264/265.56(b)	40. Does the plan include procedures for identification of released materials?	X			
264/265.56(c)	41. Does the plan include procedures/criteria to assess possible hazards to human health and the environment that may result from the release, fire, or explosion?	X			
264/265.56(e)	42. Does the plan describe all reasonable measures necessary to ensure that fires, explosions, or releases do not occur, reoccur, or spread to other hazardous waste at the facility?	X			
264/265.56(f)	43. Does the plan describe procedures to monitor for leaks, pressure buildup, gas generation, or ruptures in valves, pipes, or other equipment if the facility stops operation in response to a fire, explosion, or release?	X			

40 CFR CITATION	REGULATION	YES	NO	NA	NC
	SECTION M - NECESSARY AGREEMENTS WITH LOCAL AUTHORITIES				
264/265.37(a)	44. Has the owner/operator made the following arrangements:				
	a. Familiarized police, fire departments, and emergency response teams with the layout of the facility and associated hazards?	X			
	b. Designated one police and fire department with primary emergency authority when more than one might respond?	X			
	c. Agreements with State emergency response teams, contracts, and equipment supplies?	X			
	d. Familiarized local hospitals with the properties of waste handled at the facility and the types of injuries or illness that could result?	X			
264/265.37(b)	45. Where authorities decline to enter into such arrangements, has the owner/operator documented the refusal?			X	

COMMENTS:

5. The job description for the "warehouse worker" should be expanded to include the responsibilities regarding hazardous waste.

name chg.

me

HAZARDOUS WASTE DATA MANAGEMENT SYSTEM
MAINTENANCE FORM FOR NOTIFICATION

EPA-ID # 14121121213141

Date: 6/11/90

FACILITY NAME Altavista Glass Fabrics Plant

New Facility Name

BGF Industries Inc.

Contact Person/Position

(Last ,

First, M)

Title

Tel No

MAILING
ADDRESS

Street

City

State

Zip

LOCATION
ADDRESS

Street

City

State

Zip

County Name

County Code

Owner Name

BGF Industries G'boro NC

Operator Name

Activity Code

--- Gen --- Tr --- Ted
--- 5. Market or Burn HWF
--- A. Gen Mark to Burn
--- B. Other Marketer
--- C. Burner

Used Oil Fuel Activities

--- 6. Off-Spec Used Oil Fuel
--- A. Gen Mark to Burn
--- B. Other Marketer
--- C. Burner
--- 7. Spec Used Oil Fuel Mark

Waste Fuel Burning: Type of Combustion Device

--- Utility Boiler --- Ind. Boiler --- Ind. Furnace

Mode of Transportation (Transporters Only)

--- Air --- Rail --- Highway --- Water --- Other

Maintenance Screens

W1 Card

Existing
Waste
Code

New
Waste
Code

0009

W2 Card

Non-Reg Ind. (e303)

United States Environmental Protection Agency
Washington, DC 20460



Notification of Hazardous Waste Activity

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

For Official Use Only

Comments

C
C

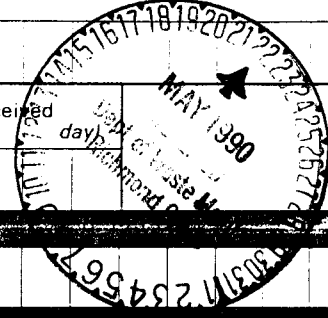
Installation's EPA ID Number

Approved

Date Received
(yr. mo. day)

C
F

T/A C
1



I. Name of Installation

BGF INDUSTRIES INC

II. Installation Mailing Address

Street or P.O. Box

C
3

401 AMHERST AVE

City or Town

State

ZIP Code

C
4

ALTAVISTA

VA

24517

III. Location of Installation

Street or Route Number

C
5

401 AMHERST AVE

City or Town

State

ZIP Code

C
6

ALTAVISTA

VA

24517

IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

C
2

JONES CHARLES CHEM.

804 369 4751

V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

C
R

BGF INDUSTRIES G'BORC^{nc} Corporation

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

B. Used Oil Fuel Activities

☒

1a. Generator

☒

1b. Less than 1,000 kg/mo.

☐

2. Transporter

☐

3. Treater/Storer/Disposer

☐

4. Underground Injection

☐

5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)

☐

a. Generator Marketing to Burner

☐

b. Other Marketer

☐

c. Burner

☐

6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)

☐

a. Generator Marketing to Burner

☐

b. Other Marketer

☐

c. Burner

☐

7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐

A. Utility Boiler

☐

B. Industrial Boiler

☐

C. Industrial Furnace

VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

☐

A. Air

☐

B. Rail

☒

C. Highway

☐

D. Water

☐

E. Other (specify)

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☐

A. First Notification

☒

B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

VAD119071314

Sub Change - Name

C

T/A C

W

1

X. Description of Hazardous Wastes (continued from front)**A. Hazardous Wastes from Nonspecific Sources.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
D001	D002	D009			
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)☒ 1. Ignitable
(D001)☒ 2. Corrosive
(D002)☐ 3. Reactive
(D003)☒ 4. Toxic
(D000)**XI. Certification**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature

Charles E. Jones

Name and Official Title (type or print)

CHARLES E. JONES
PLANT CHEMIST

Date Signed

5/21/90

EPA Form 8700-12 (Rev. 11-85) Reverse

RECEIVED
GENERAL STATE SECTION

MAY 29 1990

EPA B3

BGF Industries, Inc.
(Formerly Burlington Glass Fabrics)

May 21, 1990

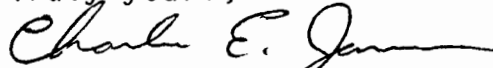
Mr. S. Ashton
Commonwealth of Virginia
Dept. of Waste Management
11th Floor, Monroe Bldg.
101 N. 14th Street
Richmond, VA 23219

Dear Mr. Ashton:

In reviewing hazardous waste activity records, I noted that your files still carry our former company name (Burlington Glass Fabrics Co.). Per our conversation, the proper name and ID is shown on the attached 8700-12. If you need further information, please advise.

Thanks for your assistance.

Truly yours,



Charles E. Jones
Plant Chemist

CEJ:ss

att.

Copy: S. Goodwin



EPA, R3

MAY 29 1990

GENERAL STATE SECTION

RECEIVED

EPA Notification of Hazardous Waste Activity		Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 1010 of the Resource Conservation and Recovery Act).	
For Official Use Only			
Comments			
<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;">C</div><div style="width: 100px; height: 20px; border: 1px solid black;">C</div></div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px;"></div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px;"></div></div>			
Installation's EPA ID Number		Approved	Date Received (yr. mo. day)
<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;">C</div><div style="width: 100px; height: 20px; border: 1px solid black;">F</div></div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px; text-align: center;">T/A C</div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px; text-align: center;">1</div></div>			
I. Name of Installation			
A L T A V I S T A G L A S S F A B R I C S P L A N T			
II. Installation Mailing Address			
Street or P.O. Box			
<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;">C</div><div style="width: 100px; height: 20px; border: 1px solid black;">3</div></div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px; text-align: center;">P O B O X 5 9 2</div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px;"></div></div>			
City or Town		State	ZIP Code
<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;">C</div><div style="width: 100px; height: 20px; border: 1px solid black;">4</div></div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px; text-align: center;">A L T A V I S T A</div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px;"></div></div>		V A	2 4 5 1 7
III. Location of Installation			
Street or Route Number			
<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;">C</div><div style="width: 100px; height: 20px; border: 1px solid black;">5</div></div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px; text-align: center;">4 0 1 A M H E R S T A V E N U E</div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px;"></div></div>			
City or Town		State	ZIP Code
<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;">C</div><div style="width: 100px; height: 20px; border: 1px solid black;">6</div></div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px; text-align: center;">A L T A V I S T A</div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px;"></div></div>		V A	2 4 5 1 7
IV. Installation Contact			
Name and Title (last, first, and job title)		Phone Number (area code and number)	
<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;">C</div><div style="width: 100px; height: 20px; border: 1px solid black;">2</div></div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px; text-align: center;">J O N E S C H A R L E S C H E M .</div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px;"></div></div>		<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"></div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;">8 0 4</div></div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px; text-align: center;">3 6 9 4 7 5 1</div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px;"></div></div>	
V. Ownership			
A. Name of Installation's Legal Owner		B. Type of Ownership (enter code)	
<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;">C</div><div style="width: 100px; height: 20px; border: 1px solid black;">R</div></div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px; text-align: center;">B G F I N D U S T R I E S , I N C .</div><div style="width: 400px; height: 20px; border: 1px solid black; margin-bottom: 2px;"></div></div>		P	
VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)			
A. Hazardous Waste Activity		B. Used Oil Fuel Activities	
<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input checked="" type="checkbox"/> 1a. Generator</div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> 2. Transporter</div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> 3. Treater/Storer/Disposer</div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> 4. Underground Injection</div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> a. Generator Marketing to Burner</div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> b. Other Marketer</div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> c. Burner</div></div></div></div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input checked="" type="checkbox"/> 1b. Less than 1,000 kg./mo.</div></div></div>		<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> 6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> a. Generator Marketing to Burner</div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> b. Other Marketer</div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> c. Burner</div></div></div></div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> 7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification</div></div></div>	
VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)			
<div style="display: flex; justify-content: space-around;"><div><input type="checkbox"/> A. Utility Boiler</div><div><input type="checkbox"/> B. Industrial Boiler</div><div><input type="checkbox"/> C. Industrial Furnace</div></div>			
VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))			
<div style="display: flex; justify-content: space-around;"><div><input type="checkbox"/> A. Air</div><div><input type="checkbox"/> B. Rail</div><div><input type="checkbox"/> C. Highway</div><div><input type="checkbox"/> D. Water</div><div><input type="checkbox"/> E. Other (specify)</div></div>			
IX. First or Subsequent Notification			
Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.			
<div style="display: flex; justify-content: space-between;"><div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input type="checkbox"/> A. First Notification</div><div style="width: 100px; height: 20px; border: 1px solid black; margin-bottom: 2px;"><input checked="" type="checkbox"/> B. Subsequent Notification (complete item C)</div></div></div>		C. Installation's EPA ID Number	
		V A D 1 1 9 0 7 1 3 1 4	

C

T/A

C

W

1

X. Description of Hazardous Wastes (continued from front)**A. Hazardous Wastes from Nonspecific Sources.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

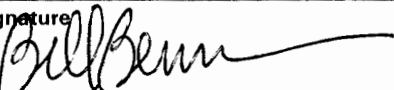
D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)☒ 1. Ignitable
(D001)☒ 2. Corrosive
(D002)☐ 3. Reactive
(D003)☒ 4. Toxic
(D000)**XI. Certification**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature



Name and Official Title (type or print)

President, BGF Industries, Inc.

Date Signed

4/1/88

BGF Industries, Inc.
3330 West Friendly Avenue
Greensboro, North Carolina 27410

March 31, 1988

Virginia Department of Health
Division of Hazardous Waste Management
101 North Fourteenth Street
11th Floor
Monroe Building
Richmond, Virginia 23219



Subject: EPA Identification No. VAD119071314
Transfer of Ownership from
Burlington Industries, Inc.
to BGF Industries, Inc.
Altavista Plant

Gentlemen:

This notice supplements the enclosed EPA Form 8700-12 and is sent to inform you that ownership of the Altavista plant of Burlington Industries, Inc. has been transferred to BGF Industries, Inc. effective March 21, 1988. The EPA identification number for the facility is VAD119071314.

Please direct all correspondence concerning the plant to:

Charley Jones
Plant Chemist
401 Amherst Avenue
P. O. Box 592
Altavista, Virginia 24517
(804)369-1246

Sincerely,

BGF Industries, Inc.

By: *Frank A. Lyle*

cc: Charley Jones
enclosure

0068G



Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

Notification of Hazardous Waste Activity

Comments

[illegible]

B	U	R	L	I	N	G	T	O	N		G	L	A	S	S		F	A	B	R	I	C	S		C	O	.
---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	--	---	---	---	---	---	---	---	--	---	---	---

Street or P.O. Box

[illegible]

Street or Route Number

[illegible]

Name and Title (last, first, and job title)

[illegible]

A. Name of Installation's Legal Owner

C	B	U	R	L	I	N	G	T	O	N	I	N	D	U	S	T	R	I	E	S	P
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

A. Hazardous Waste Activity

☒ 1a. Generator ☒ 1b. Less than 1,000 kg/mo.

☐ 2. Transporter

☐ 3. Treater/Storer/Disposer

☐ 4. Underground Injection

☐ 5. Market or Burn Hazardous Waste Fuel
(enter 'X' and mark appropriate boxes below)

☐ a. Generator Marketing to Burner

☐ b. Other Marketer

☐ c. Burner

B. Used Oil Fuel Activities

☐ 6. Off-Specification Used Oil Fuel
(enter 'X' and mark appropriate boxes below)

☐ a. Generator Marketing to Burner

☐ b. Other Marketer

☐ c. Burner

☐ 7. Specification Used Oil Fuel (Marketer to Burner)
Who First Claims the Oil Meets the Specification of _____

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler ☐ B. Industrial Boiler ☐ C. Industrial Furnace

VIII. Mode of Transportation *(transporters only — enter 'X' in the appropriate box(es))*

☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other (specify) _____

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

<input checked="" type="checkbox"/> A. First Notification	<input type="checkbox"/> B. Subsequent Notification (<i>complete item C</i>)	
---	--	--

ID — For Official Use Only														
C													T/A	C
W														1

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable
(D001)


☒ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☒ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature 	Name and Official Title (type or print) Charles E. Jones Plant Chemist	Date Signed 9/19/86
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EPA Form 8700-12 (Rev. 11-85) Reverse

RECEIVED
WV/VA SECTION

SEP 25 1986

U.S. EPA. Region III



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

TVAD119071314

JONES, CHARLES CHEM

BURLINGTON GLASS FABRICS CO

PO BOX 592

ALTAVISTA VA 24517

INSTALLATION ADDRESS

401 AMHERST AVE

ALTAVISTA VA 24517